

EXHIBIT 6

TABLE 13. SALES BY BENEFIT INCREASE TYPE

Type	2019	2018	2017	2016	2015	2014	2013
4.5+% Compound for Life	1.7%	2.0%	1.5%	2.3%	4.0%	9.2%*	22.0%
4% Compound	0.6	0.4	NA	NA	NA	NA	NA
3.5% Compound	0.3	0.2	0.3	0.9	1.5	NA	NA
3% Compound	32.7	20.9	23.2*	23.0	26.7	30.1	29.1*
2% Compound	2.9	1.6	1.6	NA	NA	NA	NA
1% Compound	1.6	0.5	NA	NA	NA	NA	NA
Step-rated	NR	NR	NR	2.3	2.4	0.0	0.1
Other Compound	8.7	19.5	19.1	10.3	4.6	6.7*	2.1
5% Simple for Life	0.1	0.4	0.2	0.6	3.4	4.8	5.6
Other Simple	0.9	1.3	NA	NA	NA	NA	NA
Age-Adjusted	0.2	0.5	0.2	4.0	1.9	0.5	0.4
Indexed for Life Level Premium	0.3	0.4	0.4	0.7	2.5	4.0	4.6
Deferred Compound Option	NR	NR	NR	3.8	3.0	2.3	5.0
FPO: Fixed	20.4	26.2*	27.5	31.5	25.7	21.9	18.8
FPO: Indexed	13.5	10.6	5.1	4.5	2.6	1.6	NA
No Benefit Increases	16.1	15.5	19.8	15.2	16.0	14.4	8.5
Other	0.0	0.0	1.1	0.9*	5.7	4.5*	3.8

*Prior to 2019, we adjusted the asterisked cells so the total would be 100%. Beginning in 2019, results might not add to 100% because of rounding.

TABLE 14: PROJECTED AGE 80 MAXIMUM DAILY BENEFIT FOR AVERAGE SALE

Year:	2019	2018	2017	2016	2015	2014	2013
Average Issue Age:	58	57	57	56	56	57	58
Age 80 MDB:	\$306	\$313	\$272	\$281	\$292	\$295	\$312
Effective average compound rate:	2.9%	3.0%	2.2%	2.4%	2.5%	2.7%	3.1%

TABLE 15: FUTURE PURCHASE OPTION ELECTION RATES

Year:	2019	2018	2017	2016	2015	2014	2013
Election Rate:	81.5%	76.9%	34.7%	32.8%	33.9%	27.8%	24.0%

Note: The difference between 2018 and 2017 was attributable to an insurer which contributed FPO data starting in 2018. It issues negative election FPOs.

2020 Milliman LTCI Survey Product Exhibit

1	COMPANY NAME	Bankers Life		Knights of Columbus		MassMutual Financial Group		Mutual of Omaha			
2	Product Type	Comprehensive		Facility-Only	Comprehensive	Comprehensive	Comprehensive		Comprehensive		
3	Product Marketing Name	SimpleChoice TO Standard	SimpleChoice TO Premier & Elite	Long Term Care Plus NHC2	Long Term Care Plus LTC2	SignatureCare 600	Mutual Care Secure Solution	Mutual Care Custom Solution			
4	Product Form Number	GR-N620	GR-N650	ICC14 NHC2 7-14	ICC14 LTC2 7-14	MM600P	LTC13		LTC13		
5	Year First LTCI Product Offered	1985		2000		2008	1987		1987		
6	Year Current LTCI Product Was Priced	2013		2014		2017	2013		2013		
7	Jurisdictions LTCI Available	All States (BCLIC in NY)		All States & DC		All States & DC & PR	All States & DC		All States & DC		
8	State Partnerships (as of January 1, 2020)	40 (Including CT, IN)		None		38	38		38		
9	Financial Ratings (as of December 31, 2019)	A.M. Best		A+	A+	A++	A+		A+		
10	Standard and Poor's	A-		AA+	AA+	AA+	A+		A+		
11	Moody's	A3		Not Rated	Not Rated	Aa3	A1		A1		
12	Fitch	A-		Not Rated	Not Rated	AA+	Not Rated		Not Rated		
14	COMDEX Ranking (as of May 1, 2020)	62		98	98	98	90		90		
15	Statutory Financials (Millions)										
16	Assets (December 31, 2019)	\$16,369		\$26,861	\$279,937	\$9,107					
17	Capital & Surplus (December 31, 2019)	\$1,177		\$2,281	\$18,893	\$3,140					
18	Percent Increase (Assets, Surplus)			6%, 8%	10%, 21%	13%, -1%					
19	LTCI Premium (Millions)										
20	2019 First Year Premium	\$2.5		\$6.0	\$6.2	\$46.3					
21	2019 End of Year In-Force Premium	\$363.0		\$75.3	\$254.9	\$508.9					
22	Percent Increase (New Business, In-Force)	-7%, -7%		24%, 4%	-22%, 3%	0%, 8%					
23	LTCI Lives Insured										
24	2019 First Year Issued	893		1,648	1,882	17,165					
25	2019 End of Year In-Force	190,865		49,804	91,559	212,758					
26	Percent Increase (New Business, In-Force)	-28%, -7%		-14%, 2%	-26%, 0%	-1%, 6%					
27	Product Ranges and Elimination Period Terms										
28	Issue Age Range	18 - 84		18 - 75	40-69 (age nearest birthday)	30 - 79					
29	Daily, Weekly or Monthly Benefit Range	\$40 - \$400		\$1,500 - \$15,000/Month	\$100-\$400	\$1,500 - \$10,000/Month					
30	Benefit Periods and/or Pools	1, 2, 3		3, 5, 10	2, 3, 4, 5, 6	2, 3, 4, 5	\$50,000 - \$500,000 (up to 8.3 years)				
31	Elimination Periods	0, 15, 30, 60, 90, 180, 365, 730, 1095, 1460		30, 90, 180 (cut in half for HCBC with care coordination)**	90	90, 180, 365	0, 30, 60, 90, 180, 365				
32	Vanishing, Cumulative	Yes, Yes		Yes, No	Yes, Yes	Yes, Yes					
33	Elimination Period Crediting	3 HC/Week = 7		Calendar Days	1 HC/Week = 7	Calendar Days After 1st Expense					
34	0-day HCBC EP with longer NH EP	NA		Facility-Only	NA	Extra Cost, HC Days Retire FC EP	Extra Cost; HC Days Retire FC EP				
35	Product Benefits										
36	Number of Benefit Pools, EPs	1,1		Facility Only	1, 1	1, 1	1, 1				
37	Partial Cash (Disability) Alternative	NA		NA	NA	NA	30% (Automatic)		40% (Automatic)		
38	Additional Cash Benefit	25% (Extra Cost)					NA				
39	HCBC Payment Basis	Weekly		Facility Only	Monthly	Daily (Monthly Extra \$)	Monthly				
40	Assisted Living (Percent of NH Max)	50%	100%	100%	100%	100%					
41	Home Care Health Aide (Percent of NH Max)						50%, 75%, 100%				
42	Independent Professional										
43	Homemaker Services	Must Be Incidental		Same as Custodial Care	Same as Custodial Care		Same as Custodial Care				
44	Informal Care (Other Than Family)	Not Covered			Not Covered	Not Covered	Cash Alternative Has 0 Day EP; if used it Delays Satisfying the EP				
45	Informal Family Care										
46	Benefit Increase Features										
47	Lifetime Compound Increases (Level Premium)	2%, 3%, 4%, 5%		3%, 5%	3%, 5%	3%, 4%, 5%	1% to 5%, 0.25% increments & Buy-Up Option				
48	Lifetime Simple Increases (Level Premium)	5%		NA	NA	NA	NA				
49	Other Increases (Level Premium)	2 Decreasing Inflation Options Are Also Offered (See Other Comments)					3% or 5% CBIO for 20 Years		Above w/ 10, 15, or 20 yr periods		
50	Future Purchase Options (FPO)	15% Every 3 Years		Board-set % Every 2 Years Until 2 Straight Declines or On Clm	NA	NA	No FPO. Buy-up option allows % incr each yr not to exceed 5%, Avail prior to sooner of 20 yrs or age 75 and not chronically ill				
51	Benefit Increase Comments	FPO: To 89 If No Declines or Claims									
52	Other Comments	5% Compound Through Age 60, Then Either 3% Compound or 5% Simple Through Age 75, Then 0%; Facility Only; NTQ				NA	Electronic App		Rider Doubles MMB for Professional HC		

2020 Milliman LTCI Survey Product Exhibit

53	COMPANY NAME	Bankers Life and Casualty Company		Knights of Columbus		Mutual of Omaha Insurance Company				
54	Product Marketing Name	SimpleChoice TO Standard	SimpleChoice TO Premier & Elite	Long Term Care Plus NHC2	Long Term Care Plus LTC2	SignatureCare 600	Mutual Care Secure Solution			
55	Sales Rep/Source for More Info	www.bankerslife.com		dan.hill@kofc.org		1-800-693-6083				
56	Ancillary Benefits									
57	Bed Reserve Days/Year, Respite during EP?	60+ Other, No	60+ Other, 21	21, 21	60+ Other, 30	30+ Other, 30				
58	Alternative Plan of Care (APC)	No	Contractual After EP	Contractual After EP	No	Contractual After EP				
59	Home Modification	NA	30 x MDB	Facility Only	min (45 x MDB, \$5000)*	2 x Mo Max	2 x Mo Max If Care Coord Is Used*			
60	Caregiver Training Benefit		25% of Monthly HC		\$500/Calendar Year	Included Above	Included Above*			
61	Emergency Alert		5% HC MMB; Max 12 Months		APC w/Care Co-ord					
62	Equipment Benefit				Included Above*					
63	Drug, Ambulance Benefit	NA, \$75/Trip x 4x/Year		NA, \$250/Year		NA				
64	Claims Issues									
65	Conditional Receipt Protection	No		No		Full, After UW Reqt	Full, After UW Reqt			
66	Coverage Beyond USA	Canada (Other = 30 Days)		Canada & US Territories		Canada & UK; Indemnity for Other (365)				
67	Provider Discounts (Directly or Indirectly)	No		LifePlans Provider Discount Program*		No	No			
68	Care Coordination Available From	Through Network		Through Network** or up to \$500/yr for client's choice		Company Staff	Company Staff			
69	Third Party Care Coordinator Limits	None		\$500/yr for client's choice		None	None			
70	Independent Review	Extended to IF in states with IR		Extended to All Claimants		As Required by Law	As Required by Law			
71	Premiums and Discounts									
72	Gender-distinct or Unisex pricing	Gender-Distinct		Gender-Distinct		Gender-Distinct				
73	Preferred Discount	10%		10%		10%				
74	Substandard Extra Ratings	25%		50%		25%				
75	Two-Spouse, Two-Partner Discounts	35%, 10%		30%, 0%		15%, 15%				
76	Requires Identical Coverage	No		No		No				
77	If Spouse is a Surprise Decline	One-spouse discount	One-spouse discount	One-spouse discount	One-spouse discount	One-spouse discount				
78	If Spouse answers "Yes" to 'Knock-Out' question									
79	One-Spouse Discount (Only 1 Spouse Applies)	15%		15%		15%				
80	Maximum Best UW Class & Spouse Discount	41.5%		37%		24%				
81	Later Marriage Earns Discount For:	IF & New Spouse (if within two years); Otherwise, New Spouse gets one-buy discount		New Spouse gets 15% discount		IF (If Same Series) & New Spouse				
82	When are dividends or credits expected to start?	NA		NA	Not Illustrated	NA				
83	Most Common Employer, Affinity Discount	NA, 5%			NA	5% (Not Employer Sponsored), 5%				
84	Minimum Size Employer Group, Number Apps	NA				5 Apps, Common Employer Program Only				
85	Minimum Size Affinity Group, Number Apps	Varies				100, 10				
86	Modal Factors (SA, O, M, PAC)	51.50%, 26.25%, 9.17%, 8.58%		52%, 26.5%, NA, 8.65%		51%, 26%, NA, 9%				
87	Credit Card: Frequencies Accepted	None		None		None				
88	Non-Level Premiums									
89	Fixed Periods	NA	NA	NA	NA	NA				
90	Paid Up at Ages									
91	Waiver of Premium									
92	First Premium Waived (Days)	Elimination		Elimination		Elimination				
93	HCBC Waiver	Yes		Yes		Yes, With 8 Days of Care/Month				
94	Joint Waiver	Extra Cost	Automatic	Not Offered		Extra Cost	Not Offered			
95	Return of Premium Upon Death (ROP)									
96	ROP Design #1	Net; Grades from 10% @ 4th Year to 100% @ Year 20+		Automatic: Net, Death Before 65		100% Gross				
97	Other ROP Design(s)	NA		NA		NA				
98	Other Riders & Features									
99	Paid Up Survivor Benefit	Extra Cost		Not Offered		Extra Cost	Not Offered			
100	Both People Must Survive Number of Years	10		NA	NA	10	NA			
101	Claim-Free Requirement?	No				No				
102	Shared Care Benefit	Permanent Extra \$, Third Pool				Not available	Permanent Extra \$			
103	Other Shared Care Aspects			NA			Must Leave 1 Year for Living Spouse			
104	Restoration of Benefits	Extra Cost	Included		Not Available		NA			
105	Other Comments	Extra-Cost Rider Ups Survivor's Daily Benefit 50% But Survivor's Prem is Unchanged; Return of Premium Applies on Lapse Also.			Claims subject to "usual and customary"; Caregiver training and care management benefits do not count against monthly max but do count against lifetime max		Return of Premium Rider applies at time of lapse also			
106	Combination Policies Offered	None		None		Life	None			

2020 Milliman LTCI Survey Product Exhibit

1	COMPANY NAME	National Guardian Life Insurance Company		New York Life Insurance Company		Thrivent
2	Product Type	Comprehensive		Work-Site		Comprehensive
3	Product Marketing Name	EssentialLTC		EssentialLTC Employer Group		Long-Term Care Insurance
4	Product Form Number	ICC16-NLTC100P		ICC18-LTCD		ICC13 H-HX-LTC
5	Year First LTCI Product Offered	2016		1988		1987
6	Year Current LTCI Product Was Priced	2016		2018	2016	2016
7	Jurisdictions LTCI Available	All States & DC (except CA, MT, NY)		Not in AZ, CA, DC, FL, ME, MT, NY		All States & DC (except NY)
8	State Partnerships (as of January 1, 2020)	35		35		41 (Including IN)
9	Financial Ratings (as of December 31, 2019)	A.M. Best		A +		A +
10	Standard and Poor's	Not Rated		AA +		Not Rated
11	Moody's	Not Rated		Aaa		Not Rated
12	Fitch	Not Rated		AAA		AA +
13	COMDEX Ranking (as of May 1, 2020)	Not Ranked		100		99
14	Statutory Financials (Millions)					
15	Assets (December 31, 2019)	\$4,719		\$330,806		\$102,221
16	Capital & Surplus (December 31, 2019)	\$390		\$26,965		\$10,065
17	Percent Increase (Assets, Surplus)	5%, 7%		6%, 9%		13%, 10%
18	LTCI Premium (Millions)					
19	2019 First Year Premium	\$3.8		\$17.3		\$9.4
20	2019 End of Year In-Force Premium	\$9.6		\$308.5		\$204.6
21	Percent Increase (New Business, In-Force)	3%, 62%		4%, 3%		-12%, 1%
22	LTCI Lives Insured					
23	2019 First Year Issued	746		5,861		3,042
24	2019 End of Year In-Force	1,486		147,868		120,846
25	Percent Increase (New Business, In-Force)	55%, 96%		6%, 1%		-17%, -2%
26	Product Ranges and Elimination Period Terms					
27	Issue Age Range	40-79 (age nearest birthday)		25-79		18-79
28	Daily, Weekly or Monthly Benefit Range	\$50 - \$300		\$50-\$400		\$1,500 - \$15,000/Month
29	Benefit Periods and/or Pools	2, 3, 4, 5, 6, LT		\$50,000-\$500,000 in increments of \$5K; Max = 60 x MMB		2, 3, 4, 5, 8
30	Elimination Periods	0, 30, 90, 180		Deductible = 3, 6, 9 or 12 x MMB (then 20% co-pay)		30, 90, 180
31	Vanishing, Cumulative	Yes, Yes		Yes, Yes		Yes, Yes
32	Elimination Period Crediting	Service Days		Dollars spent		1 HC/Week = 7
33	O-day HCBC EP with longer NH EP	Extra Cost; HC Days Retire FC EP		NA		Extra Cost; HC Days Retire FC EP
34	Product Benefits					
35	Number of Benefit Pools, EPs	1, 1		1, 0 (deductible ilo EP)		1,1
36	Partial Cash (Disability) Alternative	NA		NA		NA
37	Additional Cash Benefit					10% in Facilities but 15% at Home (Extra Cost)
38	HCBC Payment Basis	Daily		Monthly		Monthly
39	Assisted Living (Percent of NH Max)	100%		100%		100%
40	Home Care Health Aide (Percent of NH Max)					
41	Independent Professional	Not Covered		Not Covered		
42	Homemaker Services	Same As Custodial Care		1 day/wk if 2 LTC days provided		Same As Custodial Care
43	Informal Care (Other Than Family)	Not Covered		Not Covered		Not Covered
44	Informal Family Care					
45	Benefit Increase Features					
46	Lifetime Compound Increases (Level Premium)	3%, 5%		2%, 3%, 5%		1%, 2%, 3%, 5%
47	Lifetime Simple Increases (Level Premium)	NA		NA		NA
48	Other Increases (Level Premium)			Based on CPI-U (cap: 7.5%/yr)		
49	Future Purchase Options (FPO)	Benefits increase based on CPI-U (cap: 7.5%/yr) until declined 2x or age 95.		Premiums & benefits increase based on CPI-U (cap: 7.5%/yr)		FPO Provides Automatic 5% Increases Each Yr Until Declined 3 x In a Row. Always Applies When premium is waived.
50	Benefit Increase Comments	3% of 5% Step-Rated: Premiums increase a flat amount each year		CPI FPO increases use attained-age price per unit		
51	Other Comments	Single Premium is available, facilitating §1035 exchanges		Deductible instead of EP; 20% co-pay		Partners Benefit Rider provides Jt WP and Shared EP
52						Must meet eligibility requirements for fraternal membership.

2020 Milliman LTCI Survey Product Exhibit

53	COMPANY NAME	National Guardian Life Insurance Company		New York Life Insurance Company		Thrive	
54	Product Marketing Name	EssentialLTC		EssentialLTC Employer Group		Long-Term Care Insurance	
55	Sales Rep/Source for More Info	888-505-2332 or www.ngl-essentialltc.com		(800) 224-4582		1-800-THRIVEN	
56	Ancillary Benefits						
57	Bed Reserve Days/Year, Respite during EP?	30+ Other, 30		60+ Other, 30		60+ Other, 2 x Monthly Max	
58	Alternative Plan of Care (APC)	No		Contractual When Benefit Eligible		Contractual After EP	
59	Home Modification	Not Covered		NA	Grab bars, hand rails, ramps	2 x Monthly Max*	
60	Caregiver Training Benefit	5 x MDB		20% x MMB	5 x Facility MDB	2 x Monthly Max	
61	Emergency Alert	Up to \$50/Month		NA		Included Above*	
62	Equipment Benefit	Not Covered		\$5,000	\$4,000		
63	Drug, Ambulance Benefit	NA		NA		NA	
64	Claims Issues						
65	Conditional Receipt Protection	No		Up to \$5000 for 60 days after app	Up to \$1000 for 60 days after app	Full, After UW Reqt	
66	Coverage Beyond USA	Canada (others = 30 days)		3 x MMB	100 x Facility MDB	2x Max Monthly Benefit	
67	Provider Discounts (Directly or Indirectly)	No		No		No	
68	Care Coordination Available From	Through Network		Through Network	Through Network*	Through Network	
69	Third Party Care Coordinator Limits	None		None		None	
70	Independent Review	As Required By Law		Extended to IF in States with IR		Extended to IF in States with IR	
71	Premiums and Discounts						
72	Gender-distinct or Unisex pricing	Gender-Distinct	Unisex	Gender-Distinct		Gender-Distinct	
73	Preferred Discount	20%	NA	NA		10%	
74	Substandard Extra Ratings	25%	NA	25%, 50%, 75%, 100%	50%, 100%	25%, 50%	
75	Two-Spouse, Two-Partner Discounts	Together pay female premium at the older insured's age	Together pay premium at the older insured's age	25%, 25%		20%, 20%	
76	Requires Identical Coverage	Yes		No		No	
77	If Spouse is a Surprise Decline	Single Person Price at that person's age		One-spouse discount	No Discount	One-spouse discount	
78	If Spouse answers "Yes" to "Knock-Out" question	0%		10%	0%	5%	
79	One-Spouse Discount (Only 1 Spouse Applies)	52% (same age couple)		25%		30%	
80	Maximum Best UW Class & Spouse Discount	52% (same age couple)		25%		50.8%, 25.6%, NA, 8.6%	
81	Later Marriage Earns Discount For:	Neither		New Spouse		IF & New Spouse	
82	When are dividends or credits expected to start?	NA		End of 3rd year	End of 10th year	NA	
83	Most Common Employer, Affinity Discount	5%, 5%	NA	5%, 5%; not for SSTD			
84	Minimum Size Employer Group, Number Apps	5, 2-5 varies by state		None, None			
85	Minimum Size Affinity Group, Number Apps	10, 1	NA	51%, 26%, NA, 9%			
86	Modal Factors (SA, Q, M, PAC)	52%, 27%, 8.75%, 8.75%		51%, 26%, NA, 9%			
87	Credit Card: Frequencies Accepted	None		None		None	
88	Non-Level Premiums						
89	Fixed Periods	1, 10		NA		10	
90	Paid Up at Ages	NA				NA	
91	Waiver of Premium						
92	First Premium Waived (Days)	Elimination		After Deductible	Elimination	Elimination	
93	HCBC Waiver	Extra Cost		Yes		Yes	
94	Joint Waiver	Automatic		NA	Extra Cost	Automatic w/ Shared Care	
95	Return of Premium Upon Death (ROP)						
96	ROP Design #1	100% Gross or Net; 2nd-to-die		Automatic, Net, Death Before 65	Net, 100%	Net, 100% for death after 10 years	
97	Other ROP Design(s)	Can add Cash Surrender Option (grades up to 80% after 4 years)		NA		NA	
98	Other Riders & Features						
99	Paid Up Survivor Benefit	Not Offered		Not Offered		Extra Cost	
100	Both People Must Survive Number of Years	NA		NA		10	
101	Claim-Free Requirement?					Yes	
102	Shared Care Benefit	Permanent Extra \$, Third Pool		Permanent Extra \$	Permanent Extra \$, Third Pool	Extra Cost Ends If Partner Dies	
103	Other Shared Care Aspects	NA		Cannot be unilaterally taken away		Pool Depleted, Spouse < 86 & No Clm in 2 Yrs, Can Buy 2 Yr BP	
104	Restoration of Benefits			NA	> 12 mos of not being chronically ill	NA	
105	Other Comments	Markets ROP & Surrender Option as alternative to Combo Policies. Can use §1035.		Premium gtd for 3 yrs; FY 5% discount if other NYLIC policy	Qual'd EP costs can be reimbursed at end of next cal.yr after claim ends if policy is still IF (EP reinstated).	5-Year Rate Guarantee; Couples' discount applies to same generation 3-year co-habits	
106	Combination Policies Offered	See row 105		Life		None	

2020 Milliman LTCI Survey

Company (Product): Most Common Rating Class; \$100/Day; 90 Day Elimination Period

90 Day Elimination / Five-Year Benefit Period		UW Class of Displayed Premiums	Single Insured																		Male & Female Couple the Same Age																														
			Without Benefit Increases																		5% Compound Benefit Increases						Without Benefit Increases				3% Compound Benefit Increases				5% Compound Benefit Increases																
			Age 40		Age 50		Age 60		Age 70		Age 40		Age 50		Age 60		Age 70		Age 40		Age 50		Age 60		Age 70		Age 40		Age 50		Age 60		Age 70																		
			Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female																			
Bankers SimpleChoice TQ Standard LTC GR-N620	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA																		
Bankers SimpleChoice TQ Premier & Elite LTC GR-N650 Policy	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA																		
Country Life TQ Comprehensive LTC	2/2	445	691	703	1,102	1,193	1,886	2,536	3,942	1,332	2,256	1,718	2,852	2,318	3,798	3,842	6,154	2,394	4,204	2,628	4,496	3,227	5,395	4,755	7,732	966	1,535	2,617	5,506	3,049	3,884	5,198	8,497	5,608	6,055	7,329	10,615														
Long Term Care Plus NHC2	2/3	355	559	481	775	897	1,436	1,915	2,925	Not Provided		Not Provided		Not Provided		Not Provided		1,848		3,154		1,944		3,274		2,539		4,130		3,931		6,019		640		879		1,633		3,388		Not Provided		3,502		3,653		4,668		6,965	
Long Term Care Plus LTC2	2/3	459	718	636	1,004	1,118	1,589	2,382	3,527	Not Provided		Not Provided		Not Provided		Not Provided		2,343		3,837		2,403		3,915		3,100		4,832		4,722		6,942		823		1,148		1,895		4,137		Not Provided		4,326		4,422		5,553		8,165	
MassMutual SignatureCare 500	2/4	620		788		1,262		2,914		Not Provided		Not Provided		Not Provided		Not Provided		3,377		3,379		3,692		6,002		868		1,103		1,766		4,079		Not Provided		4,728		4,731		5,168		8,403									
MassMutual SignatureCare 600	2/3	573	933	858	1,423	1,502	2,457	NA	NA	1,443	2,610	1,651	3,002	2,316	4,047	NA	NA	3,721	6,856	3,448	6,552	3,671	6,656	NA	NA	1,280	1,939	3,365	NA	3,444	3,955	5,408	NA	8,990	8,500	8,777	NA														
Mutual of Omaha Secure Solution	2/4	559	910	690	1,084	965	1,623	2,150	3,348	1,180	1,962	1,418	2,406	1,781	3,175	2,904	4,892	2,733	4,880	2,901	5,327	3,071	5,646	3,990	7,078	1,028	1,242	1,812	3,849	2,199	2,677	3,469	5,457	5,329	5,760	6,102	7,748														
NGL EssentialLTC	2/3	516	786	660	1,011	973	1,496	2,131	3,206	1,177	1,791	1,398	2,143	1,791	2,752	3,005	4,521	2,762	4,203	2,902	4,448	3,173	4,876	3,964	5,964	786	1,011	1,496	3,206	1,791	2,143	2,752	4,521	4,203	4,448	4,876	5,964														
NGL EssentialLTC Employer Group	1/1	707	707	910	910	1,346	1,346	2,886	2,886	1,612	1,612	1,929	1,929	2,477	2,477	4,069	4,069	3,783	3,783	4,003	4,003	4,388	4,388	5,367	5,367	707	910	1,346	2,886	1,612	1,929	2,477	4,069	3,783	4,003	4,388	5,367														
NYL Secure Care	1/3	745	974	981	1,361	1,471	2,239	3,171	4,659	2,647	3,897	2,840	4,316	3,386	5,533	5,703	9,092	5,157	8,541	4,727	7,883	4,928	8,657	7,435	12,439	1,290	1,757	2,782	5,873	4,908	5,367	6,689	11,096	10,273	9,457	10,189	14,906														
NYL My Care	1/5	643	942	806	1,248	1,111	1,787	2,115	3,503	1,466	2,514	1,600	2,819	1,921	3,395	2,949	5,244	2,664	5,349	2,741	5,358	3,834	7,200	1,189	1,541	2,173	4,214	2,986	3,315	3,987	6,145	6,010	6,010	6,074	8,275																
Thrivent Long-Term Care Insurance	2/4	480	690	720	1,110	1,170	1,890	2,310	3,780	1,171	2,070	1,469	2,575	1,954	3,459	3,119	5,481	2,520	5,009	2,700	5,073	3,065	5,727	4,204	7,711	936	1,464	2,448	4,872	2,593	3,060	4,330	6,880	6,024	6,218	7,034	9,532														
90 Day Elimination / Three-Year Benefit Period																																																			

2020 Milliman LTCI Survey

Shared care premiums for each carrier's most common rating classification reflecting \$100/day initial maximum benefit after a 90-day elimination period, assuming that each spouse buys the indicated benefit period.

90 Day Elimination / Five-Year Benefit Period SHARED CARE														
		3rd Pool?	Without Benefit Increases				Male & Female Couple the Same Age				5% Compound Benefit Increases			
			Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70
Bankers Life and Casualty Company	Bankers SimpleChoice TQ Standard LTC GR-N620	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Bankers Life and Casualty Company	Bankers SimpleChoice TQ Premier & Elite LTC GR-N650 Policy	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Country Life Insurance Company	Country Life TQ Comprehensive LTC	No	1,055	1,677	2,859	6,016	3,332	4,244	5,679	9,283	6,127	6,616	8,008	11,598
Knights of Columbus	Long Term Care Plus NHC2	No	914	1,256	2,333	4,840	Not Provided				5,002	5,219	6,668	9,950
Knights of Columbus	Long Term Care Plus LTC2	No	1,176	1,640	2,707	5,910	Not Provided				6,181	6,318	7,933	11,664
Mutual of Omaha Insurance Company	Mutual of Omaha Secure Solution	No	1,193	1,440	2,102	4,464	2,551	3,105	4,024	6,330	6,182	6,681	7,078	8,987
National Guardian Life Insurance Company	NGL EssentialLTC	Yes	872	1,122	1,660	3,559	1,988	2,379	3,055	5,018	4,666	4,937	5,412	6,620
National Guardian Life Insurance Company	NGL EssentialLTC Employer Group	Yes	785	1,010	1,494	3,203	1,790	2,141	2,749	4,516	4,199	4,444	4,871	5,958
New York Life Insurance Company	NYL Secure Care	Yes	1,612	2,196	3,478	7,341	6,135	6,709	8,361	13,870	12,841	11,822	12,736	18,632
New York Life Insurance Company	NYL My Care	No	1,296	1,741	2,564	5,098	3,493	3,944	4,824	7,558	7,032	7,152	7,350	10,179
Thrivent Financial for Lutherans	Thrivent Long-Term Care Insurance	No	1,086	1,698	2,840	5,652	3,008	3,753	5,023	7,980	6,987	7,213	8,159	11,057
90 Day Elimination / Three-Year Benefit Period SHARED CARE														
		3rd Pool?	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70
Bankers Life and Casualty Company	Bankers SimpleChoice TQ Standard LTC GR-N620	Yes	611	972	1,643	3,565	1,671	2,328	3,280	5,649	3,862	4,440	5,278	7,801
Bankers Life and Casualty Company	Bankers SimpleChoice TQ Premier & Elite LTC GR-N650 Policy	Yes	832	1,333	2,292	5,041	2,234	3,111	4,407	7,632	5,283	6,064	7,321	11,041
Country Life Insurance Company	Country Life TQ Comprehensive LTC	No	963	1,523	2,592	5,459	2,988	3,820	5,132	8,390	5,756	6,183	7,405	10,661
Knights of Columbus	Long Term Care Plus NHC2	No	802	1,086	1,995	4,066	Not Provided				4,046	4,233	5,432	8,122
Knights of Columbus	Long Term Care Plus LTC2	No	1,013	1,404	2,294	4,698	Not Provided				4,962	5,025	6,281	9,184
MassMutual Financial Group	MassMutual SignatureCare 500	Yes	910	1,156	1,852	4,277	Not Provided				4,957	4,960	5,419	8,810
Mutual of Omaha Insurance Company	Mutual of Omaha Secure Solution	No	874	1,055	1,551	3,333	1,868	2,271	2,967	4,719	4,522	4,881	5,215	6,693
National Guardian Life Insurance Company	NGL EssentialLTC	Yes	761	979	1,448	3,104	1,734	2,075	2,664	4,376	4,069	4,306	4,720	5,773
National Guardian Life Insurance Company	NGL EssentialLTC Employer Group	Yes	684	881	1,303	2,793	1,561	1,867	2,398	3,939	3,662	3,875	4,248	5,196
New York Life Insurance Company	NYL Secure Care	Yes	1,332	1,698	2,596	5,396	4,502	4,825	5,977	9,863	9,250	8,408	9,099	13,177
New York Life Insurance Company	NYL My Care	No	1,001	1,324	1,923	3,714	2,608	2,899	3,479	5,495	5,182	5,271	5,394	7,505
Thrivent Financial for Lutherans	Thrivent Long-Term Care Insurance	No	930	1,380	2,250	4,500	2,456	3,235	4,109	6,547	5,461	5,852	6,606	8,972
90 Day Elimination / \$200,000 Benefit Period SHARED CARE														
		3rd Pool?	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70
Mutual of Omaha Insurance Company	Mutual of Omaha Custom Solution	No	1,276	1,539	2,262	4,857	2,825	3,404	4,387	6,897	6,614	7,143	7,619	9,771
90 Day Elimination / \$100,000 Benefit Period SHARED CARE														
		3rd Pool?	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70
Mutual of Omaha Insurance Company	Mutual of Omaha Custom Solution	No	840	1,014	1,494	3,235	1,860	2,240	2,892	4,588	4,346	4,692	5,019	6,493